STATE OF HAWAII RECORD OF SMALL PURCHASE

Dept./Agency:		P.O. No				
Date :						
-	•					
PART A. Desc	S RECEIVED: cription of good/service/c	onstruction:				
PART R Ouc	otations Solicited:				Date of	Amount
AWARD	Vendor Name	Representa	tive	Phone No.	Quote	Quoted
(Check Box) 1.						
□ 2.						
□ 3.						
□ 4.						
□ 5.						
PART C. Justi	fication for inability to ol	btain minimum three q	uotations, if	applicable:		
PART D. Justi	fication for award made t	to other than lowest qu	otation:			
Signature: Er	nployee soliciting quotat	ions	Signature:	Procurement Office	cer/Designe	e approval
Date:			Date:			

FILE A COPY AS SUPPORTING DOCUMENTATION IN THE PROCUREMENT FILE.